PTO/SB/17 (12-04)

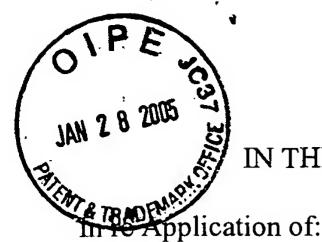
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Effective on 12/08/2004. **Transparsion of the Consolidated Appropriations Act, 2005 (H.R. 4818).	Complete if Known		
	Application Number	10/635,964	
FEE TRANSMITTAL	Filing Date	August 6, 2003	
For FY 2005	First Named Inventor	Worthington Bowie Houghton, Jr.	
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	r Name Melody M. Burch	
	Art Unit	3683	
TOTAL AMOUNT OF PAYMENT (\$) 120.00	Attorney Docket No.	155603-0313 (P003CD)	
METHOD OF PAYMENT (check all that apply)			
Check Credit Card Money Order None Other (please identify):			
Deposit Account Deposit Account Number: 09-0946 Deposit Account Name: Irell & Manella LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee			
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card			
information and authorization on PTO-2038. FEE CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES			
Small Entity	Small Entity	Small Entity	Fees Paid (\$)
Application Type Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500	1 <u>Fee (\$) </u>		10031 414 (4)
Design 200 100 100	50 130		10 m of 20 m
Plant 200 100 300	150 160		
Reissue 300 150 500	250 600		
Provisional 200 100 0		0 0 .	
2. EXCESS CLAIM FEES	•		Small Entity
Fee Description Fee (\$) Fee (\$)			
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25			
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims			
* *	Paid (\$) Multij	ple Dependent Claims	
- 20 or HP = x =	<u>Fe</u>	e (\$) Fee Paid	(\$)
HP = highest number of total claims paid for, if greater than 20 Indep. Claims	Paid (\$) —		[
3 or HP = x =-			
HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)			
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =			
4. OTHER FEE(S) Fees Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)			
Other: One month extension of time fee			
SUBMITTED BY			
Signature A. Mail	Registration No. (Attorney/Agent) 33,609	Telephone g	949-760-0991
Name (Print/Type) Ben J. Yorks	Date January 24, 2005		
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.





Worthington Bowie Houghton, et al.

Application No.: 10/635,964

Filed: August 6, 2003

ACTIVE MODULE ISOLATION For:

Examiner: Melody M. Burch

Art Group: 3683

PETITION FOR EXTENSION OF TIME

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In accordance with 37 C.F.R. § 1.136(a), the Applicants for the above-identified application respectfully petition the Commissioner for a one (1) month extension of time, extending the period for response to February 1, 2005, from the Office Action dated December 1, 2004. A Response to Restriction Requirement is enclosed. A check in the amount of \$120.00 to cover the extension of time fee is enclosed herein. Please charge any additional fees to Deposit Account No. 09-0946. A duplicate copy of the Fee Transmittal is enclosed for this purpose.

> Respectfully submitted, **IRELL & MANELLA LLP**

Dated: January 24, 2005

840 Newport Center Drive, Suite 400 Newport Beach, CA 92660 949-760-0991

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120.00 OP

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 24, 2005.

Reg. No. 33,609

Date

Atty. Docket No.: 155603-0313

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